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## Putting fathers in the picture

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by Sharin Baldwin. *Sharin is a trained nurse, midwife and health visitor and a keen advocate for health visiting. Her research interest is the mental health and wellbeing of fathers, an area that is fairly neglected. She is currently undertaking a PhD in this field at King's College London and is the first health visitor to be awarded a Clinical Doctoral Fellowship by NIHR.*

Fathers' mental health and wellbeing has attracted more media attention in recent months but despite this there is very little support out there for new fathers. We know that as men become fathers they face many changes and new challenges, as women do, which can increase stress and have a negative impact on their mental wellbeing.

In a recent study by Darwin and colleagues, one father described the increased stress relating to new fatherhood as being caused by “never having any time to relax” and “the non-stop-ness of it”<sup>1</sup>. Similarly, in other studies, new fathers have reported experiencing difficulties in balancing the competing demands of family, work and their own needs, as well as struggling with impaired relationships with their partners following the birth of their baby<sup>2</sup>.

Up to 10% of fathers are reported to suffer from depression during their partner’s pregnancy and following birth<sup>3</sup>, while up to 16% suffer from anxiety in the antenatal period and up to 18% in the postnatal period<sup>4</sup>. Poor mental health in fathers has a negative impact of their own health and can affect the health and well-being of their partner and child. Despite this, fathers’ mental health is not routinely assessed by health professionals in the antenatal and postnatal period in the UK and nor is there any national clinical guidance (such as [NICE](#)) to support this.

While the importance of mothers’ needs during this period is widely recognised, fathers’ needs remain comparatively poorly understood and often unmet by relevant health professionals. National policies such as the [Healthy Child Programme](#) highlights the need to have better support for fathers but in practice there is still a big gap, as health services generally tend to be more ‘mother and child focused’ rather than being ‘family focused’. New fathers may not receive adequate support before and after birth, and these are the times when the challenges may be most demanding for new parents. Research findings show that new fathers continue to feel marginalised by health professionals during the antenatal and postnatal period, and health professionals report to lack the confidence and skills to provide effective support to new dads. This has led to the development of my PhD research, the [New Dad Study](#) (NEST).

Through NEST we will be able to learn more about new fathers’ early experiences of becoming a parent and how this may impact on their mental health and wellbeing.

Our findings will inform how health professionals who are in contact with new parents during and after the birth of their baby could better support new fathers. I am currently undertaking a [systematic review](#) to summarise the current evidence on fathers’ experiences and needs during the perinatal period. More information can be found here:

Following this, further exploratory work will be undertaken with first-time fathers in five London boroughs to better understand their experiences.

As well as focusing on fathers’ mental health, perinatal mental health in general is an area that I am passionate about. As an Institute of Health Visiting Perinatal Mental Health Champion, I have co-trained over 500 health professionals in perinatal mental health to include health visitors, GPs, practice nurses, staff nurses, nursery nurses, health visiting assistants and Early Years staff.

Raising awareness of perinatal mental health for mothers and fathers is key to improving mental health and reducing stigma. I have developed a number of helpful perinatal mental

health resources, through the Institute of Health Visiting, to support parents and health professionals (see below). A new toolkit for health visitors from the IHV and Public Health England, due to be published shortly, will soon be added. It will provide evidence about why fathers matter and how to identify and remedy gaps locally, and is designed to be used by health visitors as leaders of the Healthy Child Programme for the 0-5's, service providers and commissioners.

## References and Resources

1 Darwin et al, 2017 p5

<sup>2</sup> Edhborg et al 2015, Genesoni and Tallandini, 2009

<sup>3</sup> Paulson and Bazemore, 2010

<sup>4</sup> Leach et al, 2016

<http://ihv.org.uk/for-health-visitors/resources-for-members/resource/ihv-tips-for-parents/mental-health/emotional-health-and-wellbeing-fathers/>

<http://ihv.org.uk/for-health-visitors/resources-for-members/resource/ihv-tips-for-parents/mental-health/emotional-health-and-wellbeing-mothers/>

<http://ihv.org.uk/for-health-visitors/resources/good-practice-points/>

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For MABIM tools for leaders working in perinatal mental health

visit: [www.maternalmentalhealthalliance.org/mumsandbabiesinmind/mabim-tools](http://www.maternalmentalhealthalliance.org/mumsandbabiesinmind/mabim-tools)

*[Mums and Babies in Mind](#) supports local leaders in four areas of England to improve care and quality of life for mums with mental health problems during pregnancy and the first year of life, and their babies.*

*Read more from the [Mums and Babies in Mind](#) blog:*

- [9/6/17 Video Interactive Guidance in a Nutshell](#)
- [24/5/17 Tackling Stigma Around Perinatal Mental Illness](#)
- [14/3/17 Beyond Peer Support: Twitter and Perinatal Mental Health](#)
- [21/2/17 What a difference an hour can make: Training GPs in Perinatal Mental Health](#)
- [2/2/17 Commissioning in Perinatal Mental Health: Everyone's Business](#)

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